



2/82

Please type a plus sign (+) inside this box ☐

PTO/SB21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/063,802
	Filing Date	May 14, 2002
	First Named Inventor	Wallen, et al.
	Group Art Unit	2182
	Examiner Name	Not yet assigned
Total Number of Pages in This Submission	Attorney Docket Number	2103099-991100

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement with 7 references	<input type="checkbox"/> CD, Number of CD(s) _____	RECEIVED DEC 18 2002 Technology Center 2100
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT	
Firm or Individual name	TIMOTHY W. LOHSE (Reg. No. 35,255) Gray, Cary Ware & Freidenrich
Signature	
Date	December 9, 2002

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner of Patents, Washington, DC 20231 on this date: December 9, 2002			
Typed or printed name	Susan Pingue	Date	December 9, 2002
Signature			



#6ul
4-3-03

ATTORNEY DOCKET NO. 2103099-991100

THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Wallen, et al.

SERIAL NO.: 10/063,802

GROUP NO.: 2182

FILING DATE: May 14, 2002

TITLE: METHOD AND SYSTEM FOR CAPTURING, MANAGING, AND
DISSEMINATING MANUFACTURING KNOWLEDGE

INFORMATION DISCLOSURE STATEMENT

RECEIVED

DEC 18 2002

Technology Center 2100

Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

In accordance with the provisions of 37 C.F.R. § 1.97, Applicant hereby make of record the references listed on the accompanying Form PTO-1449 for consideration by the Examiner in connection with the examination of the above-identified patent application. Copies of the references are enclosed.

REMARKS

In accordance with the provisions of 37 C.F.R. § 1.97, this statement is being filed
(CHECK ONE).

- ☒ (1) within three (3) months of the **Filing Date** or before the mailing date of a **First Office Action** on the merits; or
- ☐ (2) after the period defined in (1) but before the mailing date of a **Final Rejection** or **Notice of Allowance**, and
- ☐ the requisite Statement is below, **OR**
- ☐ the requisite fee under Rule 1.17(p), namely **\$240.00**, is included herein, or
- ☐ (3) after the mailing date of a **Final Rejection** or **Notice of Allowance** but before the payment of the **Issued Fee**, **AND**
- ☐ Applicant hereby Petitions the Commissioner to accept and consider the attached Information Disclosure Statement, **AND**
- ☐ the requisite Statement is below, **AND**

☐ the requisite petition fee due under Rule 1.17(i), namely \$130.00 is included herein.

It is respectfully requested that each of the references shown on the attached Form PTO-1449 be made of record in this application.

STATEMENT

As required under §1.97(e), Applicants, through the undersigned, hereby state either that [check the appropriate space]:

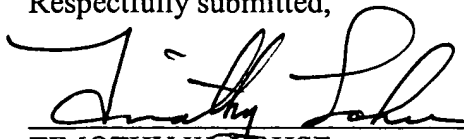
- ☒ 1. [E]ach item of information contained in the Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application **not more than** three months prior to the filing date of the Information Disclosure Statement; or
- ☐ 2. [N]o item of information contained in the Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application, and to the knowledge of the person signing this Statement after making reasonable inquiry, no item of information contained in the Information Disclosure Statement was known to **any** individual designated in §1.56(c) **more than** three months prior to the filing of the Information Disclosure Statement.

FEE AUTHORIZATION

Should any fee associated with the submission of this paper not be attached hereto as a check, the Commissioner is authorized to charge the missing fee to our Deposit Account No. 07-1896. Any overpayments should be credited to said Deposit Account.

Date: December 9, 2002

Respectfully submitted,



TIMOTHY W. LOHSE

Reg. No. 35,255

Attorney for Assignee

GRAY CARY WARE & FREIDENRICH
1755 Embarcadero Road
Palo Alto, CA 94303-3340
Telephone No.: 650-320-7426
Facsimile No.: 650-320-7401

